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SERIAL NUMBER 10/635,504	FILING OR 371(c) DATE 08/07/2003 RULE	CLASS 436	GROUP ART UNIT 1743	ATTORNEY DOCKET NO. MSE #2675
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APPLICANTS

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**** CONTINUING DATA *******✓ *m/w* This appln claims benefit of 60/409,331 09/10/2002**** FOREIGN APPLICATIONS *******✓ *m/w***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 11/06/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>hal</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 9

ADDRESS

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TITLE

Auto-calibration label and apparatus comprising same

FILING FEE RECEIVED 1740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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